

to build was still on display—as was the profound frustration that the dissidents responsible for the attack have not been brought to justice.

For a durable peace to be achieved, both of these emotions must be harnessed effectively. And there should be no mistake about it: US law enforcement will aggressively target any effort from whatever quarter to undermine the peace process through illegal activities from the United States.

The Good Friday Agreement represents the very best hope for lasting peace in Northern Ireland. Fully implementing, it will make Northern Ireland a beacon of hope for those who struggle for reconciliation and peace in every corner of the world—from the Balkans to the Middle East.

I hope to be able to visit Northern Ireland soon, and to confirm that the will of the people is being heeded.

William J. Clinton

NOTE: This opinion-editorial was released by the Office of the Press Secretary on October 20. An original was not available for verification of the content of this item. This item was not received in time for publication in the appropriate issue.

Memorandum on Waiver and Certification of Statutory Provisions Regarding the Palestine Liberation Organization

October 19, 2000

Presidential Determination No. 2001–02

Memorandum for the Secretary of State

Subject: Waiver and Certification of Statutory Provisions Regarding the Palestine Liberation Organization

Pursuant to the authority and conditions contained in section 538(d) of the Foreign Operations, Export Financing, and Related Programs Appropriations Act, 2000, as contained in the Consolidated Appropriations Act for Fiscal Year 2000 (Public Law 106–113), and as provided for in the Joint Resolution Making Further Continuing Appropriations for the Fiscal Year 2001, and for Other Purposes (Public Law 106–306), I hereby determine and certify that it is important to the

national security interests of the United States to waive the provisions of section 1003 of the Anti-Terrorism Act of 1987, Public Law 100–204.

This waiver shall be effective for a period of 6 months from the date hereof. You are hereby authorized and directed to transmit this determination to the Congress and to publish it in the *Federal Register*.

William J. Clinton

NOTE: This message was released by the Office of the Press Secretary on October 20. An original was not available for verification of the content of this memorandum. This item was not received in time for publication in the appropriate issue.

Statement on Signing the Ryan White CARE Act Amendments of 2000

October 20, 2000

Today I am very pleased to sign into law S. 2311, the “Ryan White CARE Act Amendments of 2000,” which reauthorizes and expands health care and essential support services for hundreds of thousands of Americans living with HIV and AIDS.

The broad bipartisan support in the Congress for this bill sends a clear message that together we can continue to reach out to individuals and families living with HIV and AIDS. Since its creation, the Ryan White program has provided thousands of people with HIV care and support services in their communities and access to cutting-edge therapies that would have remained beyond their reach. It has helped them stay out of the hospital and live healthier and better lives.

During my administration, funding for the Ryan White CARE Act has increased by more than 300 percent, and funding for basic AIDS research and HIV prevention has increased by over 80 percent. Our strong commitment to addressing the HIV epidemic has begun to pay dividends. The latest data show that the number of Americans diagnosed with AIDS has declined for the first time in the history of the AIDS epidemic, deaths from the disease have declined by over 40

percent, and there has been a sharp decline in new AIDS cases in infants and children.

However, we know that our battle against AIDS is far from over. As we continue to search for a cure and a vaccine to protect every American, our support for programs like the CARE Act is essential. We owe a special thanks to Senators Kennedy, Jeffords, and Frist and Representatives Waxman and Coburn, and to the many AIDS advocates and organizations, for their tireless efforts in guiding this bill to enactment.

NOTE: S. 2311, approved October 20, was assigned Public Law No. 106-345. This item was not received in time for publication in the appropriate issue.

Statement on Signing the Ryan White CARE Act Amendments of 2000

October 20, 2000

Ten years ago, shortly after Ryan White's death, the Congress chose to build a legacy in his memory. As a young man, Ryan White changed the world, and so has the program that bears his name. Today I am pleased to sign into law S. 2311, the "Ryan White CARE Act Amendments of 2000," which reauthorizes and expands health care and essential support services to hundreds of thousands of Americans living with HIV and AIDS.

The reauthorization of the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act is the cornerstone of my Administration's domestic HIV and AIDS care and treatment effort, and one of its top legislative priorities. The broad-based bipartisan support in the Congress for the reauthorization of this vital program sends a clear and strong message that together we can bring care and compassion to our fellow citizens living with HIV and AIDS. I am pleased that during my Administration, funding for the CARE Act program has increased over 300 percent. For fiscal year 2001, this landmark program will receive more than \$1.7 billion.

Today, the CARE Act has become a model for health care delivery not only in the United States, but around the world. It is a shining example of the good that can come

from collaboration, coordination, and concerted action. The CARE Act has brought together Republicans and Democrats, cities and States, hospitals and community-based organizations, providers, and people living with AIDS—and the results are a tribute to the power of public-private partnerships. It has created a continuum of care that is both compassionate and cost-effective—one that saves both lives and money.

When the CARE Act was originally created, we were sadly unable to do much for those who were sick, and many of the services provided were designed to help people die with dignity. Thankfully, much has changed. The CARE Act is now solidly about *living* with HIV and AIDS. Since its last reauthorization, biomedical research has brought hope and renewed optimism with the discovery of protease inhibitors and combination therapies. The CARE Act has made the promise of biomedical research a reality in the lives of people living with HIV and AIDS in every corner of this country.

Last year alone, approximately one hundred thousand people living with HIV and AIDS received access to drug therapy because of the CARE Act. This is particularly important given that half of the people served by the CARE Act have family incomes of less than \$10,000 a year—and the new drug "cocktails" cost more than \$12,000 annually. We know all too well that the drugs are not enough. Primary care and support services are vital to ensuring both access and adherence to these complex drug regimens. It is this comprehensive package of essential services that the CARE Act provides—and with impressive results.

The CARE Act has helped to reduce both the frequency and length of expensive inpatient hospitalizations, lowered AIDS mortality, reduced mother-to-child transmission, and enhanced both the length and quality of life for people living with AIDS. The Act has also provided a mainstay of essential health and related support services to individuals living with HIV disease and their families—crucial services in our progress against this relentless disease.

The CARE Act also serves those most in need. Nearly six out of every 10 people served by the CARE Act are poor. They are